

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

| | | | |
|---|--|---|----------------------------------|
| The C/OH Instruction Guide explains how to complete this form | | 1 Filer ID(Ethics Commission filers) | 2 Total pages filed |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS/MRS/MR | FIRST | MI |
| | Mr. | Jew | Don |
| | NICKNAME | LAST | SUFFIX |
| | Boney | | |
| OFFICE USE ONLY | | | |
| Date Received | | | |
| 10/26/2015 | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address | ADDRESS / PO BOX; | APT/SUITE #; | CITY; STATE; ZIP CODE |
| | P.O. Box 8447 Houston Texas 77288 | | |
| Date Hand-delivered or Date Postmarked | | | |
| 5 CANDIDATE / OFFICEHOLDER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (281) 702-9988 | | |
| 6 CAMPAIGN TREASURER NAME | MS/MRS/MR | FIRST | MI |
| | Mrs. | Dorca | |
| | NICKNAME | LAST | SUFFIX |
| | Medina Boney | | |
| Receipt # | | Amount | |
| Date Processed | | | |
| Date Imaged | | | |
| 7 CAMPAIGN TREASURER ADDRESS (Residence) | STREET ADDRESS (No PO Box Please); | APT/SUITE #; | CITY; STATE; ZIP CODE |
| | 2503 Rosedale St Houston Texas 77004 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (832) 618-6619 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit | | |
| | <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only) | | |
| 10 PERIOD COVERED | Month | Day | Year |
| | 9/26/2015 | | THROUGH |
| | | Month | Day |
| | | 10/26/2015 | |
| 11 ELECTION | ELECTION DATE | | ELECTION TYPE |
| | Month | Day | Year |
| 11/3/2015 | | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff |
| | | <input checked="" type="checkbox"/> General | <input type="checkbox"/> Special |
| 12 OFFICE | OFFICE HELD (if any) | | 13 OFFICE SOUGHT (if known) |
| | City Council - District D | | Controller |

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 FILER NAME Jew Don Boney

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

| | |
|----------------|--------------------------------------|
| COMMITTEE TYPE | COMMITTEE NAME |
| | COMMITTEE ADDRESS |
| | COMMITTEE CAMPAIGN TREASURER NAME |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS |

GENERAL

SPECIFIC

| | | | |
|-------------------------|---|--|------------|
| 17 CONTRIBUTION TOTALS | 1 | TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ |
| | 2 | TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$1,195.00 |
| EXPENDITURE TOTALS | 3 | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ |
| | 4 | TOTAL POLITICAL EXPENDITURES | \$762.39 |
| CONTRIBUTION BALANCE | 5 | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD | \$932.61 |
| OUTSTANDING LOAN TOTALS | 6 | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$0.00 |

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Jew Don Boney

Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

| | | |
|-----------------------------|--|--|
| 19 FILER NAME Jew Don Boney | | 20 Filer ID (Ethics Commission Filers) |
| 21 | SCHEDULE SUBTOTALS | SUBTOTAL |
| | NAME OF SCHEDULE | AMOUNT |
| 1. | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$1,195.00 |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$0 |
| 4. | SCHEDULE E: LOANS | \$0.00 |
| 5. | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$762.39 |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$0 |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$0 |
| 8. | SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD | \$0.00 |
| 9. | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$500 |
| 10. | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$0 |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$0 |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$0 |

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)**

**FORM C/OH
ADDENDUM**

C/OH NAME Jew Don Boney

ACCOUNT # (Ethics
Commission filers)

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | | | |
|---|---|--|---|-------------------------------------|
| The Instruction Guide explains how to complete this form. | | | 1 | Total Pages Schedule A1: |
| 2 FILER NAME Jew Don Boney | | | 3 | Filer ID (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# X) Rose Y Adams | 7 | Amount of contributions (\$) |
| | 10/1/2015 | 6 Contributor address; City; State; Zip Code Houston TX 77016 | | \$50.00 |
| 8 | Principal occupation / Job title (See Instructions) | | 9 | Employer (See Instructions) |
| 4 | Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Peggy & Ruth Boney | 7 | Amount of contributions (\$) |
| | 10/5/2015 | 6 Contributor address; City; State; Zip Code Rockdale TX 76567 | | \$40.00 |
| 8 | Principal occupation / Job title (See Instructions) | | 9 | Employer (See Instructions) |
| 4 | Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Levy Cassie | 7 | Amount of contributions (\$) |
| | 10/8/2015 | 6 Contributor address; City; State; Zip Code Rosenberg TX 77471 | | \$100.00 |
| 8 | Principal occupation / Job title (See Instructions) | | 9 | Employer (See Instructions) |
| 4 | Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Pamela D Ellis | 7 | Amount of contributions (\$) |
| | 10/8/2015 | 6 Contributor address; City; State; Zip Code Sugar Land TX 77479 | | \$200.00 |
| 8 | Principal occupation / Job title (See Instructions) | | 9 | Employer (See Instructions) |
| 4 | Date | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | | |
|---|--|-------------------------------|-------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 | Total Pages Schedule A1: |
| 2 FILER NAME Jew Don Boney | | 3 | Filer ID (Ethics Commission filers) |
| 9/26/2015 | Aundre Fusiler ----- 6 Contributor address; City; State; Zip Code Houston TX 77045 | 7 | Amount of contributions (\$) 100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| 10/8/2015 | Larry Johnson ----- 6 Contributor address; City; State; Zip Code Houston TX 77014 | 7 | Amount of contributions (\$) 30.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| 10/8/2015 | Cleveland Lee ----- 6 Contributor address; City; State; Zip Code Houston TX 77014 | 7 | Amount of contributions (\$) 25.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| 10/19/2015 | Gene L. & Aubrey S. Locke ----- 6 Contributor address; City; State; Zip Code Houston TX 77021 | 7 | Amount of contributions (\$) 250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| | Reggie E. & Harold E. Perry ----- 6 Contributor address; City; State; Zip Code | 7 | Amount of contributions (\$) 250.00 |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | | |
|---|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 | Total Pages Schedule A1: |
| 2 FILER NAME Jew Don Boney | | 3 | Filer ID (Ethics Commission filers) |
| 10/22/2015 | 6 Contributor address; City; State; Zip Code Houston TX 77014 | | 100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| 4 Date 10/19/2015 | 5 Full name of contributor Alvis Prince | <input type="checkbox"/> out of state PAC(ID#) | 7 Amount of contributions (\$) 150.00 |
| | 6 Contributor address; City; State; Zip Code Houston TX 77085 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| 4 Date 10/7/2015 | 5 Full name of contributor Alvaro Rodriguez | <input type="checkbox"/> out of state PAC(ID#) | 7 Amount of contributions (\$) 25.00 |
| | 6 Contributor address; City; State; Zip Code Houston TX 77059 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |
| 4 Date 10/15/2015 | 5 Full name of contributor Vascola Stoney | <input type="checkbox"/> out of state PAC(ID#) | 7 Amount of contributions (\$) 25.00 |
| | 6 Contributor address; City; State; Zip Code Houston TX 77096 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | |
|---|----------------------------|
| The Instruction Guide explains how to complete this form. | 1 Total Pages Schedule A1: |
|---|----------------------------|

| | |
|----------------------------|---------------------------------------|
| 2 FILER NAME Jew Don Boney | 3 Filer ID (Ethics Commission filers) |
|----------------------------|---------------------------------------|

| | | | | | |
|------------|--|--------------------------|------------------------|--|--------------------------------|
| 4 Date | 5 Full name of contributor | <input type="checkbox"/> | out of state PAC(ID#) | | |
| | Ajama Webster | | | | |
| | 6 Contributor address; City; State; Zip Code | | | | 7 Amount of contributions (\$) |
| 10/15/2015 | Kansas City MO 64132 | | | | 75.00 |

| | |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

| | | | | | |
|-----------|--|--------------------------|------------------------|--|--------------------------------|
| 4 Date | 5 Full name of contributor | <input type="checkbox"/> | out of state PAC(ID#) | | |
| | Arlina Worrill | | | | |
| | 6 Contributor address; City; State; Zip Code | | | | 7 Amount of contributions (\$) |
| 10/7/2015 | Chicago IL 60617 | | | | 25.00 |

| | |
|---|-------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions) |
|---|-------------------------------|

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | 3 Filer ID (Ethics Commission filers) |
| 4 Date | 5 Payee name | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | |
| 8 PURPOSE OF EXPENDITURE | (a) Category | (b) Description |
| | | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name | office sought office held |

| | | |
|--|--|---|
| 4 Date 10/1/2010 | 5 Payee name Unity National Bank | |
| 6 Amount (\$) 11.75 | 7 Payee address; City; State; Zip Code 2602 Blodgett St Houston TX 77004 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category | (b) Description |
| | Accounting/Banking | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller office held |

| | | |
|--------------------------|--|-----------------|
| 4 Date 9/27/2015 | 5 Payee name Star Stop 60 | |
| 6 Amount (\$) 40.00 | 7 Payee address; City; State; Zip Code 2111 Southmore Houston TX 77004 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category | (b) Description |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | | |
|--|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | | 3 Filer ID (Ethics Commission filers) |
| | Travel in District | <input type="checkbox"/> <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |
| 4 Date 10/1/2015 | 5 Payee name African American Chamber of Commere of Greater Houston | | |
| 6 Amount (\$) 140.00 | 7 Payee address; City; State; Zip Code 6112 Wheatley St Houston TX 77091 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Event Expense | <input type="checkbox"/> <input type="checkbox"/> | (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | 3 Filer ID (Ethics Commission filers) |
| 4 Date 10/7/2015 | 5 Payee name Stripes | |
| 6 Amount (\$) 40.00 | 7 Payee address; City; State; Zip Code 2329 Southmore Houston TX 77004 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Travel in District | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller office held |

| | | |
|---|---|--|
| 4 Date 10/8/2015 | 5 Payee name City of Houston Parking | |
| 6 Amount (\$) 4.00 | 7 Payee address; City; State; Zip Code Houston TX | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller office held |

| | | |
|---------------------------------|---|-----------------|
| 4 Date 10/10/2015 | 5 Payee name Stripes | |
| 6 Amount (\$) 40.00 | 7 Payee address; City; State; Zip Code 2329 Southmore Houston TX 77004 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category | (b) Description |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | | |
|--|--|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | | 3 Filer ID (Ethics Commission filers) |
| | Travel in District | <input type="checkbox"/> <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |
| 4 Date 10/20/2015 | 5 Payee name T-Mobile | | |
| 6 Amount (\$) 238.99 | 7 Payee address; City; State; Zip Code P.O. Box 660252 Dallas TX 75266 | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Fees | <input type="checkbox"/> <input type="checkbox"/> | (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | |
|-----------------------------------|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | 3 Filer ID (Ethics Commission filers) |
| 4 Date 10/21/2015 | 5 Payee name Harris County Toll Rd | |
| 6 Amount (\$) 4.00 | 7 Payee address; City; State; Zip Code Houston TX | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held Jew Don Boney Controller | |

| | | |
|---------------------------------|--|--|
| 4 Date 10/15/2015 | 5 Payee name Stripes | |
| 6 Amount (\$) 40.00 | 7 Payee address; City; State; Zip Code 2329 Southmore Houston TX 77004 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Travel in District | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held Jew Don Boney Controller | |

| | | |
|---------------------------------|--|-----------------|
| 4 Date 10/9/2015 | 5 Payee name La Tapatia Mexican Café | |
| 6 Amount (\$) 47.36 | 7 Payee address; City; State; Zip Code 1749 Richmond Ave Houston TX 77098 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category | (b) Description |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | |
|----------------------------|----------------------------|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | 3 Filer ID (Ethics Commission filers) |
|----------------------------|----------------------------|---------------------------------------|

| | | |
|--|-----------------------|---|
| | Food/Beverage Expense | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|--|-----------------------|---|

| | | | |
|--|--|-----------------------------|-------------|
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |
|--|--|-----------------------------|-------------|

| | |
|---------------------|------------------------|
| 4 Date 10/1/2015 | 5 Payee name Stipes |
|---------------------|------------------------|

| | |
|------------------------|--|
| 6 Amount (\$) 40.00 | 7 Payee address; City; State; Zip Code 2329 Southmore Houston TX 77004 |
|------------------------|--|

| | | |
|--------------------------|------------------------------------|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category Travel in District | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
|--------------------------|------------------------------------|--|

| | | | |
|--|--|-----------------------------|-------------|
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |
|--|--|-----------------------------|-------------|

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | |
|----------------------------|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | 3 Filer ID (Ethics Commission filers) |
| 4 Date 10/3/2015 | 5 Payee name Baba Yega | |
| 6 Amount (\$) 21.65 | 7 Payee address; City; State; Zip Code 2607 Grant St Houston TX 77006 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held Jew Don Boney Controller | |

| | | |
|--------------------------|---|--|
| 4 Date 10/19/2015 | 5 Payee name Fadi's Mediterranean Grill | |
| 6 Amount (\$) 12.96 | 7 Payee address; City; State; Zip Code 4738 Beechnut St Houston TX 77096 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| | 9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held Jew Don Boney Controller | |

| | | |
|--------------------------|--|-----------------|
| 4 Date 10/3/2015 | 5 Payee name Tacos A Go Go | |
| 6 Amount (\$) 11.60 | 7 Payee address; City; State; Zip Code 3704 Main St Houston TX 77002 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category | (b) Description |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | | |
|--|--|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | | 3 Filer ID (Ethics Commission filers) |
| | Food/Beverage Expense | <input type="checkbox"/> <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |

| | | | |
|---------------------------|---|--|--|
| 4 Date 9/30/2015 | 5 Payee name Pappas BBQ | | |
| 6 Amount (\$) 6.12 | 7 Payee address; City; State; Zip Code 1217 Pierce Houston TX 77002 | | |

| | | |
|--------------------------|---|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category Food/Beverage Expense | (b) Description <input type="checkbox"/> <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense |
|--------------------------|---|--|

| | | | |
|--|--|---------------------------------|-------------|
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |
|--|--|---------------------------------|-------------|

**POLITICAL EXPENDITURES
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

The Instruction Guide explains how to complete this form.

| | | | |
|--|--|--|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Jew Don Boney | | 3 Filer ID (Ethics Commission filers) |
| 4 Date 10/23/2015 | 5 Payee name Constant Contact | | |
| 6 Amount (\$) 63.96 | 7 Payee address; City; State; Zip Code | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name Jew Don Boney | office sought Controller | office held |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED